PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

W-UT000 /60UT

		CL AIMC A										
CLAIMS AS								SMALL ENTITY				THAN
TOTAL CLAIMS			(Column 1)		(Column 2)		TYPE			OR		
FOR					e e parte e e		RAT		FEE	4	RATE	FEE
			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		* 7		X\$	9=		OR	X\$18=	
INDEPENDENT CLAIMS				inus 3 =	* 4		X42	2=		OR	X84=	
MI	JUITPLE DEPE	NDENT CLAIM P	RESENT				+14)=		OR	+280=	
* 1	the difference	e in column 1 is	less than z	ero, enter	"0" in d	column 2	TOT			OR	TOTAL	
CLAIMS AS AMENDED - PART II									L	1011	OTHER	THAN
_	SCANASSE SOSSICIONES SOCIAL	(Column 1)	10.00 April 10.00	(Colun		(Column 3)	SMA	LL I	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID F	BER JUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	
	Independent	* ENTATION OF MI	Minus	***	<u> </u>	=	X42	=		OR	X84=	
Ц.	THOTFILSE	ENTATION OF IVI	JUITPLE DE	PENDENT	CLAIM		+140	=		OR	+280=	
							TO				TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)	ADDIT. F	-EE] • · · /	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ST SER USLY	PRESENT EXTRA	RAT	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	₌		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	01.4144	=	X42:	-		OR	X84=	
	THOTTKESE	INTATION OF MIC	ILLIPLE DEF	PENDENT	CLAIM		+140	_		OR	+280=	
							TO1 ADDIT. F			OR ,	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	n 2)	(Column 3)	ADDII. I			,	ADDII. PEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=	X\$ 9:	=		OR	X\$18=	
AM	Independent	*	Minus	***	01.4114	=	X42=	1		OR	X84=	
	TINOT PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM			\dashv				
* If the entry in column 1 is less than the entry in column 2 write "0" in column 3									OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 enter "2". ADDIT. FEEOR												
7	he "Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the	highest number	found in the	аррг	opriate box	in colu	ımn 1.	